

as well as for whole neighborhoods. The New York State report provides an important tool, which together with effective leadership and assistance by state governments can create vigorous local programs to overcome the scourge and blight and slum which has befallen our communities. All health workers concerned with community planning and development would do well to study it.

The Importance of Learning to Crawl

MANY PROFESSORS who are remembered by their students have clichés which over the years they learn to use with considerable skill. A professor of obstetrics, back in medical school days, was no exception to the rule. Over and over again he hammered home the point that one must learn to crawl before one walked; learn to walk before one ran; and learn to run before one leaped. The number of his pupils who benefited from this maxim was highly significant. How many sound public health programs have come to naught or have died aborning because this axiom was ignored!

Perhaps that is why the exciting possibilities inherent in physical rehabilitation have not been realized. Instead of being aware of the lack of personnel resources and the relative poverty of many local health departments, those who justifiably believe that the crippled and disabled should be helped to walk again, were blinded by the very brilliance of their cause. They mistakenly assumed a sophistication on the part of local health departments which did not

exist. As a result, only in the large cities have health departments been able to make any significant entry into the vast and fertile field of physical rehabilitation.

Now, belatedly, the leaders of this movement are starting anew, on their hands and knees, crawling—crawling in order to better prepare themselves for the walking that must be done. They are starting with a single, simple concept; a concept of improved paramedical services, particularly nursing services, for stroke patients.

This concept is understandable anywhere and everywhere. It is tangible and concrete. It can be implemented without the appropriation of large amounts of new money. It can be understood with relative ease by most public health workers in local communities. Physicians appreciate the value of these paramedical services offered by public health agencies for their private stroke patients. They see in them little threat to their own management of the case.

Once this single, simple application of basic physical rehabilitation principles has been mastered by local health departments, the task of expanding the contribution in terms of magnitude and complexity will not be hard. Once the crawling stage has been mastered, can the walking stage be far behind?

If this evolutionary approach to the intricate problem of applying the many techniques already known about the rehabilitation of the physically handicapped is followed assiduously, the day will come when adequate facilities and services will be available all over America to help the lame and the halt to walk and the blind to see.